

PTO/SB/515 (09-07)

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**SUPPLEMENTAL DECLARATION
FOR REISSUE
PATENT APPLICATION
TO CORRECT "ERRORS" STATEMENT
(37 CFR 1.175)**

Attorney Docket Number	00328-010200/RE/CON
First Named Inventor	DARDIK, Irving
COMPLETE if known	
Application Number	10/723,920
Filing Date	November 25, 2003
Art Unit	3735
Examiner Name	LACYK, John P.

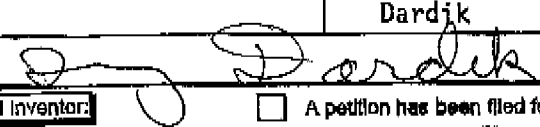
I/We hereby declare that:

Every error in the patent which was corrected in the present reissue application, and which is not covered by the prior oath(s) and/or declaration(s) submitted in this application, arose without any deceptive intention on the part of the applicant.

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I/We hereby declare that all statements made herein of my/our own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: <input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))	Family Name or Surname
Irving	Dardik
Inventor's Signature 	Date 10/3/07
Name of Second Inventor: <input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))	Family Name or Surname
Inventor's Signature	Date

☐ Additional inventors or legal representative(s) are being named on the _____ supplemental sheets PTO/SB/02A or 02LR attached hereto.

This collection of information is required by 37 CFR 1.175. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 422 and 37 CFR 1.11 and 1.14. This collection is estimated to take 1.8 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1480, Alexandria, VA 22313-1480. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: DARDIK, Irving	Docket No.: 100328-010200/RE/CON
Serial No.: 10/723,920	Art Unit: 3735
Filing Date: November 25, 2003	Examiner: LACYK, John P.
Title THERAPEUTIC EXERCISE PROGRAM	
SUPPLEMENTAL DECLARATION FOR REISSUE PATENT APPLICATION	
DECLARATION OF SOLE INVENTOR	
<p>As a below-named inventor, I hereby declare that my residence, post office address and citizenship are as stated below next to my name; I believe that I am the original, first and sole inventor of the subject matter which is claimed and for which a re-issue of Patent No. 5,752,251 (hereinafter, "the '521 patent") is sought on the invention entitled above, the specification of which was filed on the date listed above as with the Application Serial Number listed above.</p> <p>I believe that the '521 patent is partly inoperative by reason of said patent claiming less than I had a right to claim in said patent. There are seven (7) claims in the '521 patent. Claim 1 is the only independent claim. Claims 1-7 are method claims. During prosecution of the '521 patent, the prosecuting attorney failed to present claims to other statutory categories of invention, including claims directed to additional methods and an apparatus. This error is corrected by new claims 58-74. All errors being corrected in this reissue application arose without any deceptive intent on my part.</p>	
REVIEW AND UNDERSTOOD CLAUSE	
<p>I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment(s). I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with <i>Title 37, Code of Federal Regulations, §1.56(a)</i>.</p>	
WILLFUL FALSE STATEMENT CLAUSE	
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine, or imprisonment, or both, under <i>Section 1001 Title 18 of the United States Code</i>, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>	
CORRESPONDENCE ADDRESS	
Please send all correspondence regarding the above-captioned application to:	
CUSTOMER NUMBER: 22191	
Direct all phone inquiries to: 703-903-7536	

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POWER OF ATTORNEY	
I hereby appoint as my attorneys, with full powers of substitution and revocation, to prosecute this application and transact all business in the Patent and Trademark Office connected therewith, the Patent Practitioners associated with Customer Number 22191.	
FIRST OR SOLE INVENTOR INFORMATION	
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<i>Date:</i>	<i>Signature:</i>
10/3/07	